

## UNITED STATE DEPARTMENT OF COMMERCE

## **Patent and Trademark Office**

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APPLICATION NO. **FILING DATE** FIRST NAMED INVENTOR ATTORNEY DOCKET NO. Z 09/154,274 09/16/98 TURI BTG-5001 **EXAMINER** QM32/0712 LEWIS.W FOLEY AND LARDNER PAPER NUMBER STE. 500 **ART UNIT** 3000 K STREET N.W. WASHINGTON DC 20007-5109 3731 **DATE MAILED:** 07/12/01

Please find below and/or attached an Office communication concerning this application or proceeding.

**Commissioner of Patents and Trademarks** 

Application No. 09/154,274

Applicant(s)

Turi

## Interview Summary

Examiner
William W. Lewis

Group Art Unit 3731



All participants (applicant, applicant's representative, PTO personnel):	
(1) William W. Lewis	(3)
(2) A. Rawlins (Rep.)	
Date of Interview	-
Type: a)   Telephonic b)   Video Conference c)   Personal [copy is given to 1)   applicant	2) applicant's representative]
Exhibit shown or demonstration conducted: d) [ Yes	e) 🛮 No. If yes, brief description:
Claim(s) discussed: N/A	
Identification of prior art discussed:  N/A	
Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.  Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments:  Examiner informed Mr. Rawlins that the amendment filed 6-7-01 would be entered since the communication was in compliance.	
(A fuller description, if necessary, and a copy of the amendallowable, if available, must be attached. Also, where no available, a summary thereof must be attached.)	dments which the examiner agreed would render the claims copy of the amendments that would render the claims allowable is
i) It is not necessary for applicant to provide a sepa	rate record of the substance of the interview (if box is checked).
INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MF already been filed, APPLICANT IS GIVEN ONE MONTH FROM	IAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST PEP section 713.04). If a reply to the last Office action has OM THIS INTERVIEW DATE TO FILE A STATEMENT OF THE rd of Interview requirements on reverse side or on attached

WILLIAM W. LEWIS

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.